

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U <u>N/A</u> <u>2970</u>	2. Fiscal Year Covered From: <u>01 / 01 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>JOHN J PYHILLO</u> P.O. Box, Bldg., Room No., if any _____ Street <u>526 SAW MILL RIVER ROAD</u> City <u>MILLWOOD</u> State <u>NEW YORK</u> ZIP Code + 4 <u>10546-1019</u>	4. Name, file number, and address of labor organization. Name <u>UNITED CEMENT MASONS LOCAL No. 780</u> Labor Organization File Number <u>006553</u> P.O. Box, Building and Room Number, if any <u>FRONT ENTRANCE</u> Street <u>150-42 12th AVENUE</u> City <u>WHITESTONE</u> State <u>NEW YORK</u> ZIP Code + 4 <u>11357</u>
5. Position in labor organization. <u>FINANCIAL SECRETARY / BUSINESS MANAGER</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>N/A</u> Trade Name, if any: <u>N/A</u> P.O. Box, Bldg., Room No., if any _____ Street <u>N/A</u> City <u>N/A</u> State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. <u>N/A</u> 7.b. Amount. <u>N/A</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>John J Pyhilo</u>	On <u>7/2/05</u> Date	<u>917-578-6378</u> Telephone Number

Name of Person Filing JOHN J. PYLLOFile Number U- N/A 2970

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name CEMENT MASONS LOCAL 780 FUNDSTrade Name, if any: —P.O. Box, Bldg., Room No., if any REAR ENTRANCEStreet 150-42 12TH AVENUECity WHITESTONEState NEW YORK ZIP Code +4 11357

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name CEMENT MASONS LOCAL 780 APPRENTICESHIP FUNDSTrade Name, if any: —P.O. Box, Bldg., Room No., if any REAR ENTRANCEStreet 150-40 12TH AvenueCity WhitestoneState NEW YORK ZIP Code +4 11357

11.a. Nature of such dealing.

ATTENDANCE TO WORLD OF CONCRETE
TRADE SHOW IN ORLANDO, FL.
FEB. 14, 2004 - FEB 21, 2004

11.b. Approximate dollar value of such dealing. \$1,348.76

12.a. Nature of interest held or income received.

REIMBURSEMENT FOR EXPENSES -
HOTEL, AIRFARE, CAR RENTAL, MEALS.

12.b. Amount 2,348.76

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name NEW YORK CONCRETE CONSTRUCTION CORP.Trade Name, if any: CEMENT WORKERSP.O. Box, Bldg., Room No., if any 9B FLOORStreet 49 W. 45TH STREETCity NEW YORKState NEW YORK ZIP Code +4 10036

14.a. Nature of payment.

ATTENDANCE OF GOLF OUTING
JULY 21, 2004 - CONSTRUCTION
INDUSTRY COUNCIL GOLF OUTING

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment.

\$550 per ticket